PTO/SB/17 (12-04)

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FEB 2 1 2006

Effective APE Deg/2004.			Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			7 (ppilod doll 11 dillio di		10/800,179		
FEE TRANSMITTAL			Filing Date	/	March 12, 2004		
For FY 2005			First Named Inventor		William A. Cuevas		
Car 07 OFD 4 27			Examiner Name A. Kosar				
Applicant claims small entity status. See 37 CFR 1.27			Art Unit 1654				
TOTAL AMOUNT OF PAYMENT (\$) 620.00		Attorney Docket No. DOC 0057 PA/DO			VDC5074/	GC792-4	
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
Deposit Account Deposit Account Number: Deposit Account Name:							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments under 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION							
BASIC FILING, SEARCH, AND EXAMINATION FEES     FILING FEES SEARCH FEES EXAMINATION FEES     Small Entity Small Entity     Small Entity							
Application Type Fee	(\$) Fee (\$)	Fee (\$)		Fee		<u> </u>	ees Paid (\$)
Utility 300		500	250	200			
Design 200		100	50	130	) 65		<del></del>
Plant 200		300	150	160		_	
Reissue 300		500	250	600	300		
Provisional 200 2. EXCESS CLAIM FEES	100	0	0	(	0	 F4	Small Entity
Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent							50 Fee (\$) 50
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100							
Multiple dependent claims						_	360 180
Total Claims Extra C	Claims Fee (\$) x	<u>Fee P</u>	Paid (\$)		ole Dependent (	<u>Claims</u> ee Paid (\$)	
- 20 or HP = x = Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20  Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)							
3 or HP = x = HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets   Extra Sheets   Number of each additional 50 or fraction thereof   Fee (\$)   Fee Paid (\$)    - 100 =   /50 = (round up to a whole number)   x   =							
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)  Other: Brief on Appeal - \$500.00, Request for One Month Extension of Time - \$120.00  620.00							
Other: Brief on Appeal - \$500.00, Request for One Month Extension of Time - \$120.00 620.00							

SUBMITTED BY Registration No. (Attorney/Agent) 29,001 Telephone (937) 449-6400 Signature Date February 17, 2006 Name (Print/Type) Timothy W. Hagan

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.